

(Music)

STAN PIOTROSKI: All right. Well, welcome, everyone, to this parents' workshop. I believe this either our third or fourth workshop. Right, dear?

STAFF: Yeah, I think... (inaudible).

MR. PIOTROSKI: Yeah. And we have found every year that it's been very helpful. What we will do this morning, all of us who work very collaboratively because this is a big job. Mom and dad have a big job with children. We have a big job supporting you. And we try to work very closely together. Can you hear me OK? Am I speaking loudly enough? All right. You know, in public speaking they do say that you're supposed to have eye contact, right, and walk around. So you're going to have to follow me with the camera. Gotcha. All right.

My little boy had ADHD. And I remember we would go to church and he would sit in the pew for about two seconds – two seconds – and then his great aunt behind us would say, "Well he's just an active little boy." And that's true. Justin was an active little boy. And he had the best personality. Everyone liked him. He was a great little kid. But his mother and I – there was always – you know, we'd always look at each other and say, "Hey, what's up? What's up?"

And then he went to school. And he went to this private school, and the sisters came up and said, "You have a real active little boy." And I thought, well, you're really telling us something here. So we went to get him tested. And I got to tell you this: emotionally, that was a tough thing for us to do. I just got to put it out there. To say anything was wrong with my kid – I had a problem with it.

But we went to the – to the center – there's a Reg Lourie Center here in Silver Spring and they tested him. I mean, they went through all these tests – all these assessments – and then they brought my wife and I in and they gave us the results. And they said, "Well, you know, he has ADHD." And I said, "Well, you know, what can you do with that?" And they gave us some recommendations. He was on medication for a while.

And then at age 14 – and we saw such a – and I'm not espousing medication. My son's now 34-years-old, probably the age of some of you in here or older. But at that point, that and some other behavioral things were the treatment of choice. And he did quite well academically and now he's a successful businessman in Southern California. He's married. His wife just finished her nursing degree, and they're moving on with their life.

But I remember Justin came to visit when he was in college. And we were talking one time and something was going on. He said, "Dad, excuse me." He goes, "I have to have a little time out." And he went into the

study and he put on some earphones. He goes, "This is how I calm down." So through the years, this is how he, you know, he learned. He learned.

So I just want to say to all you parents out there who have any varying degree – who have children with varying academic challenges – whether it's ADHD or reading concerns, that they are manageable, they can be treated, and your children can do quite well. I saw it with my own son, and I just want to pass on that little bit of hope, you know, to those parents who are sitting out there saying, "Well, where do I go from here?" And I know you, like myself and my wife, what we wanted was the best for our kids. That's what we wanted. We wanted to make sure that they were doing OK and they had the best.

I'm going to talk to you about doing the best for your kids today. I think the State Department offers the Rolls-Royce in support. I worked for DOD for 22 years and met some other people who were associated with the DOD. And I can tell you that Department of State, USAID, and the Foreign Services offer the very best I've ever seen. I've got a post-graduate degree in child and family studies. And I have a sense of what it takes to assess a child for what their needs are and for the types of treatment that they may need to meet those challenges – and for a mom and dad too.

What – I'm going to go through some slides. But honestly, this is all information – it's all on your CDs that Archana gave out. All right, we have two new social workers: Helen Jones and Terri Nemethy. They're covering WHA. Helen covers Northern WHA all the way from Central America all the way up to Canada and the Caribbean. Terri covers Southern WHA. Ellen and Vivian, if I'm goofing up here in any way just tell me.

We have some newly authorized expenditures. I heard a number of people talk about funding. We're going to talk about that. And you also have it in your slides. And then the availabilities – this is really hot, folks, I want to tell you this right now, the MCI. I've been, you know, I brought this up two years ago and I said, "If they haven't started this by the next time I'm gone, I'm not saying a word about it."

But I can tell you right now that this is a real important project that MED is right down the middle of. I've been involved with – and we're looking at developing a bidding tool so that officers will have – its screening; it's not the deciding factor. I'll go over that in just a minute, but it's very important. So here are some, what I would say, hot tickets.

Just briefly, ECS is a confidential counseling service. What does that mean? That means that anyone who comes to speak with us, the content of that session is confidential. Would it – but there are four exceptions. What do you think they are? All right, we're in school now. Number one, what's the first exception that we cannot keep quiet about?

Q: Harm to self.

MR. PIOTROSKI: Number two?

Q: Harm to others.

MR. PIOTROSKI: Harm to others. Number three?

Q: Substance abuse?

MR. PIOTROSKI: Hm? Hm? We can maintain that, yeah. Child abuse, if a child is injured; or elder abuse, if an elderly person is injured we have to report that. What's the last one? We all work in foreign services. What would be the last one? Dr. Ward?

Q: Security?

MR. PIOTROSKI: Security. That's right, yeah, national security. So if somebody came and said that they're going to do something that affects national security, we have to report that. We do consultation with supervisors and workplace training.

OK, let's talk about the special needs education program. Here are our kids. They come in all shapes and sizes. The special needs education program. This is DSSR 276.8 – you may want to write that down – it's under DSSR 270.0, which is the educational allowance coverage that covers everything. But 276.8 is a special needs program.

STAFF: Does everyone know what DSSR is?

Q: No.

MR. PIOTROSKI: Department of State regulation. Thank you, Archana, Department of State regulation.

STAFF: And they're – (inaudible) – available on the Internet.

MR. PIOTROSKI: Mm-hmm. (Affirmative.) Yep. And if you want a copy of that, contact our office. We'll send you a copy, all right?

We're going to talk about the identification of eligibility for special needs, the initiation and authorization of the allowance, the assistance with identification and scheduling of various assessments. Sometimes parents come to us – like, you know, when Justin was little I didn't know. We had to go to somebody. They told us this is what the issue was. So ECS will assist you with getting that information.

Annual renewal of the special needs allowance. It's annually renewed. Annual special needs training at FSI – ta-da, here we are. New reimbursable special needs expenditures – I'm going to talk about that. Typical issues: learning, behavioral changes, not finishing their work, appearing anxious or depressed, irritability, exhibiting low self-esteem, exhibiting angry or oppositional behavior, difficulty understanding school work. These are just, you know, a few examples. There's hundreds more.

I want to – just to show you this, this is where the kids are. We have 1,642 children that we case manage every year, give or take. I mean, that number can change. And it's coming up on 1,700 children right now.

Q: Seventeen Hundred special needs children?

MR. PIOTROSKI: Yep, special needs children. I'm – thanks for that. There are about 10,000 Foreign Service children that we – that are in the general population. Now, I'm going to present this slide. Now why would I present this slide? There are 70 right now, I think there are 73, this slide is about a month old – but there are 73 children in Bogota. Why is that important? Why is that –

Q: (Inaudible) – at all. Why are there 70 kids in Bogota?

MR. PIOTROSKI: Why do you think there would be? Sir?

Q: Because they have the resources – (inaudible).

MR. PIOTROSKI: There you go, C and G. And Bogota has a whole learning center – a building – have you been to Bogota?

Q: No, but I've spoken to them. They're outrageously good.

MR. PIOTROSKI: Yeah. It's incredible. And they have – you know, they have the – Pam, have you been there?

Q: No.

MR. PIOTROSKI: OK. So this is a center. The school looks like a college campus and then they have this building there that's devoted to children with any level of academic difficulty. And in central Bogota, they have the school called Anthios (ph). Anthios (ph) is a – (inaudible) – for severely challenged children. Right, Leah (ph), you aware of that?

Q: Yeah, my husband was there – (off mic).

MR. PIOTROSKI: Is that right?

Q: (Off mic) – was there on business and I was able to – (off mic).

MR. PIOTROSKI: Right. So – and did you get to Anthios (ph)?

Q: No.

MR. PIOTROSKI: I was so impressed. And I'll tell you why. I went there and the ratio of caretakers to children is one-to-one. It was incredible. So that's why you have a lot of families gravitating towards Bogota, because its resources – (coughs) – pardon me – Brussels, the same thing. So the relationship between resources and number of children at post is important because just by eyeballing that you're going to get some information – just eyeballing it.

Now we have a list for every single post on the planet. And if you want that list, it's yours. You know, just – I just presented this one page, but we have the entire list. So if you want it, just call us, we'll make sure you get it. And here are the last three – the top 20. Israel and Jordan, they have some good resources. Israel has quite a few good resources.

All right. Initiation of first special needs allowance. So let me just speak extemporaneously here. It's a good word, don't you think? Billy or Susie or Johnny has a problem in school. And normally what happens is that the teacher will call, right, and say, "You know, Johnny's having a problem or Susie's having a problem – having a problem with math, having a problem with learning in some capacity, can't sit still, seems uncomfortable." But it normally comes from the school.

You all are noticing as I did, that there was something up with the learning capacity of our children. However, you know when the school brings it to our attention it means that we need to do something about it. Our recommendation at ECS is that – gather all the information. If it's – if it's a report from the teacher, if they are now developing an IEP – do you know what an IEP is? Individual Education Plan, OK? If they're developing that, they're saying that you know they're concerned and they would like to come up with a plan.

Also, your health unit – you may have brought your child to the health unit because there was some problem, you had some concern. You could get a statement from the health unit. You may have a previous evaluation that was completed at another school. Well, bring that to our attention. Once you send that to one of the social workers – and again, you know, Ellen covers Europe, Don covers Africa – the whole continent of Africa; he just got back from a trip to Africa. Where were you Don?

Q: Zimbabwe and Botswana.

MR. PIOTROSKI: And Botswana. So Don I can tell you has a lot of information about Africa, about resources. He works very closely – Pam, that's your region as well, isn't it? So anyone considering Africa,

you have – you have the two primary people here who know a lot about Africa so make sure you hook up with them.

Vivian (sp) is going to Israel this week and she'll be meeting with the health units there. She's already been there – to Jordan and to Cairo. So she managed that area very well, knows a lot about resources there or the lack thereof. We have – and I already mentioned – our two new social workers. Jacqueline Pouncy-Smith is our social worker who covers the Far East. Jackie's very knowledgeable. Who am I forgetting?

Q: (Inaudible.)

MR. PIOTROSKI: I already mentioned them – yeah – earlier, Don, thanks. I think I've covered all the different – and they're on the list too. And by the way, you're all going to get a copy of this – this is our Employee Consultation Services. It's hot off the press. It has all the information in the back. But, you know, here's another thing about public speaking. You never hand out anything when you're speaking. You know why? Why, Claudia (sp)?

Q: Because everybody will start reading it.

MR. PIOTROSKI: That's it. And I would feel ignored. You know the apple doesn't fall far from the tree sometimes, I'm telling you. So the very first step is if you feel that there's some problem, contact ECS. Contact the office of overseas schools. Contact FLO. We're going to get together. We're going to work with you, first of all, to identify what's going on. And we will authorize the funding. Claudia, are you in Dhaka now?

Q: Yeah, I'm going over there.

MR. PIOTROSKI: You're going to Dhaka. So if Claudia called me up and said, "Stan, this is what's going on and I need renewal of that", I'd say, "Claudia, send me the information and we will then renew the special needs education allowance." That's basically what it is. It's the report.

Here's the funds, folks. They went up twice in two years. They had been stable for a number of years. And then I worked with the director of the Office of Allowances and we were able to substantiate and support that there needed to be an increase. At one time it was \$26,000 – \$26,800, I think? And they doubled it. And then they increased it again.

This is your – by the way, does this – is this a pointer?

STAFF: Yes. It should be. No, it's – yeah.

MR. PIOTROSKI: There it is. (Chuckles.) I like toys. (Laughter.) I saw somebody had an iPad – 1 or 2? Two? You like it? Great. (Chuckles.) A little – a little aside. Anybody else have iPads? Oh, OK. Sarah? That's cool. Archana, you have one too? All right. I just can't figure out how you put it in your pocket.

At post rate, \$57,300. So if your child has any level of academic challenge, the amount is \$57,300. What comes out of that? What comes out of that?

Q: Private tutoring? Private tutoring?

MR. PIOTROSKI: Tutoring can, sure, sure.

Q: The tuition.

MR. PIOTROSKI: The tuition, yeah. They – (inaudible) – tuition. And we're going to go over what else comes out of that. But the tuition does come out of this.

Now let's say you're at a post, and there's some posts like London, "mucho dinero," right – very expensive. \$57,000 may cover it, I don't know. But it's getting close. We can then authorize – the social worker can authorize – another amount. And so the total allowable at-post is almost \$86,000. I can tell you that's going to cover it. That amount's going to cover it, whatever's going on.

Let's say it doesn't. Sometimes it doesn't, folks. You're going to send us near the end of the school year; you're going to say, "We're running out of money." Then you're going to tell us how you think you're running out of money – you know, services or tuition went up, whatever it might be. It comes to us; we take it to the director of the office of allowances with a recommendation that we pay the additional funds. So it's a fairly generous allowance. We're hoping that this amount will cover what you need.

Now let's say that your child's going to go to a boarding school. We do not authorize children under the age of 12; they have to be 12. Too young. You know, when you have an 11-year-old, they're still young.

How many have young kids here? All right, all right. You know, like under the age of 12, you're not going to send them to a boarding school. (Laughter.)

What's that? You'd like to?

Q: Even if you want to?

MR. PIOTROSKI: I understand completely. Trust me; I understand.

The amount for that is \$77,400; but again, we can authorize up to \$116,000. It's a good benefit, and this is on your DVD – or your CD. I get confused.

DVD, Sarah, or CD?

STAFF : CD.

MR. PIOTROSKI: CD, OK. Because we're not looking at pictures, right?

But you do. All right. Boarding school rates if your child's 12 or older, if – this – sometimes we get panic calls from overseas.

I'm now going to walk – I'm walking – you got me?

(Direction.)

MR. PIOTROSKI: How about now? All right.

Get Scott and Anne Marie (sp) here.

All right. Just to make sure that you have any question, we're going to put you on TV.

Q: OK.

MR. PIOTROSKI: We'll get a panic call. My child's been thrown out of school, and there's a lot going on. It's a crisis, right? It's a crisis.

So what do we do? We'll work with the parents in their – if the needs cannot be met at that location, we're going to start thinking about boarding school. So I would go over to Ellen (sp); I say, Ellen (sp), this is your case. They're in London or they're in Paris. We need to take a look at an alternate academic placement for this child. We're going to work very closely with you on that. Now I'm going to say this, and we talked about this, and I wasn't sure I was going to bring this up; but I'm going to bring it up.

We can authorize educational consultants in very, very, very specific cases. Now everyone would want an educational consultant; we cannot do that. Some of the criteria that we have is that child has to be hospitalized psychiatrically and has significant learning disabilities. If that child has that – and the options for placement are so minimal, we now have the authority – and this is one of the new standards – we can authorize an educational consultant.

Again, folks, what are the criteria? The child has to be hospitalized, and the second one – yes, ma'am?

Q: How do you define an educational consultant? Is it like a full-time, one-on-one –

MR. PIOTROSKI: Uh-huh. (Affirmative.)

Q: – employee? Is that what you mean?

MR. PIOTROSKI: No, this is – Ellen (sp), do you want to respond?

MS. : An educational consultant is someone who works with the family while applying to a boarding school. So they're like certified; it's a profession – (off mic) – and so they are able to go and match, you know, learning what the child's needs are. They know about all the – (off mic). We know about some of them, but not to the degree that an educational consultant does.

Q: It's for the purpose of placement?

STAFF : Yeah.

Q: OK.

MR. PIOTROSKI: Pam and I worked on a case. I'm not going to go into the specifics of the – specifics of the case to – I don't want to break confidentiality; but we worked on a case: There was one place in the United States that would take the child – one. And we worked very closely with that months, and that was one of the supporting reasons why we were able to get an educational consultant. One school, after months and months, would take that child – a very serious situation.

So we approached legal; I approached the Office of Allowances. Actually, Don was the spearhead for all of this, and he did a remarkable job; did his homework; brought it to our attention, and we went forward with it.

But those are the criteria. So I just want to put that out there and clarify that. Because usually what happens is: Somebody got an educational consultant. That's the criteria; it's pretty serious, all right? But we – we're now able to do that.

Travel is authorized for the child and one parent. Now, are there times when we can authorize more? Yes, but it's very specific. Sometimes, you know, a mother's breast-feeding, and her child has to go for an assessment – can we authorize that? We can, but we try to look very, very carefully.

I know, Ellen (sp), you're saying no; but there are times when we're – we've been able to do that. Yeah, it's rare. It's rare, and we have to – actually we have to get approval. We don't approve it; it goes to the

director of allowances. They're the ones who approve it. It's – we don't have the authority to approve it. We have to take it to them.

Q: Sir?

MR. PIOTROSKI: Yes.

Q: Is boarding school a choice that parents can make or is it something that we have to first – go with the at-post alternative? Really be diligently pursuing it at post and then do boarding school?

MR. PIOTROSKI: Right, if you discover, you know, they're just not going to meet your child's needs and you and your social worker – and you see (us, saying ?) it's not going to happen there – then we can authorize it.

You can't have services at post that would meet the needs of the child before we authorize an away-from-post rate. You – if there are services at post, you can't go. If there are not services at post, and there might be a variety – you know, if service providers aren't there, things have changed – Leah (ph), what –

STAFF: (Off mic.) Sorry; I'm just going to jump in.

Boarding school is always a choice. It doesn't – frequently kids who are – who (aren't ?) special needs – (off mic) – so yeah. But you're talking about –

MR. PIOTROSKI: Special needs, right.

STAFF: – a different level of monetary support.

MR. PIOTROSKI: Right. I'm just on it from the special needs perspective.

STAFF: Right.

MR. PIOTROSKI: Yeah. I mean, you always have the choice to use a regular educational amount, but I could tell you that this amount that we have here far exceeds that. Yeah, and if we're talking about special needs, then we'll work together.

OK. Thanks for that, Leah (sp).

Home schooling – just briefly touch on that. Home schooling is always approved, always approved. If you have a child with a special education need, then we look at that very carefully. Sometimes it's not

approved, and the reason for that is – is that we have to – our job in ECS is to assure that the needs of that child is going to be met.

And sometimes parents will say, well, we'll home-school. But then we look at what's going on with the child and we can't approve it. Normally we do, but if the needs, you know, exceed what the home schooling program can do – and you got to take that all into consideration.

Wouldn't you say, Sarah?

That's really important. Sarah is our child psychiatrist.

Calvert and Nebraska are just two examples.

Vivian (sp), Calvert – is it younger or older?

STAFF: No, you've got that reversed.

MR. PIOTROSKI: Yeah, that's why I was –

STAFF: Nebraska is for the older – (off mic) – and we help –

MR. PIOTROSKI: That's right. Yeah, yeah, yeah. She did it. (Laughter.)

STAFF: Don't look at me! (Laughter.)

MR. PIOTROSKI: I – you know what?

STAFF: (Off mic.)

MR. PIOTROSKI: My intuition was picking up here; I went – no, I don't know. So I must be smarter than you.

STAFF: I – (off mic).

MR. PIOTROSKI: Right.

STAFF: There are other home schooling like –

MR. PIOTROSKI: Right.

STAFF: – EYU in Baltimore has a program; I think it's "ferocity" or –

STAFF: That's a Calvert –

STAFF: That's a Calvert program.

STAFF: – OK, because that's the one – (off mic) – like reading and things at the Office of Overseas Schools – (off mic).

MR. PIOTROSKI: You know, actually, we knew this. We just wanted to test – we just wanted to test Pam (sp) and Leah (sp) back there. (Chuckles.) OK.

Here's what's paid for – and again, you have the slide – occupational therapy, speech therapy – by the way, when do you think it starts for a child?

Q: Speech therapy? Is that what you're saying, for speech therapy?

MR. PIOTROSKI: Just for any of these services; at what age can we authorize a special needs education allowance? What do you think?

Q: When they're diagnosed with the problem?

MR. PIOTROSKI: Sure, and at what age? What age do we start? What do you think?

Q: (Off mic.)

MR. PIOTROSKI: Elementary – OK.

Q: Birth.

MR. PIOTROSKI: Birth. It starts at birth. So if your little boy or little girl, little baby, you know, comes into this world, and they're – there's some developmental concerns, it starts at birth, the allowance.

Goes up to what age?

Q: (Off mic.)

MR. PIOTROSKI: Yeah.

Q: The first and the 22nd birthday?

MR. PIOTROSKI: Yeah, and I think if they're in school on the 22nd birthday and they turn 23, it will still cover them.

Right, Don?

I'm pretty sure about that.

STAFF : (Off mic.)

MR. PIOTROSKI: Yeah, that's when it ends. OK, so they can – they can – like if they're 22 and they're entering their final year, and they turn 23 –

STAFF: (Off mic) – as long they don't have a diploma.

MR. PIOTROSKI: Yeah, that's it. Can't have a diploma. Soon as they get a diploma, it stops. And it's also overseas; it's an overseas program. I should just let you know that.

Q: Can we revisit that?

MR. PIOTROSKI: Pardon me?

Q: So this whole realm that you're talking about is at post?

MR. PIOTROSKI: That's correct. Ah, no, and away from post –

Q: No, but I mean – but I mean –

MR. PIOTROSKI: You have to be at post. That's right: You have to be assigned overseas.

Q: When the person is assigned, when the person arrives at post, that's when the – (off mic) – sets into motion?

MR. PIOTROSKI: That's correct, that's correct. Yes.

Good question; thank you.

Here's something else that's new, and I give Don credit for this. I'm – you know, the guy deserves the credit.

Counseling, counseling – at one point, it was only the initial psychiatric, psychology – right? – initial assessments, and then after that, the counseling portion would be on your health insurance. Not anymore. Counseling by a non-M.D., non-M.D.

If you – your child needs to see a psychiatrist for, you know, medication evaluation, that still goes through your health insurance. But for Ph.D., psychologist, LCSW, social worker – if they need counseling and it's identified by the school – parents cannot just say, my kid needs counseling; has to be identified by the school. If the school says, I believe, you know, Johnny or Suzy or Billy or Mary needs counseling and there's a statement to that effect, we will now pay for counseling. Big change.

Yes, ma'am.

Q: What about counseling for the parents? You know, if I was dealing with a child?

MR. PIOTROSKI: Right, usually that's in tandem.

You know, Sarah (sp), do you want to answer that?

Because I think that usually parents are – if it's separate, it does not. It does not.

Q: (Off mic.)

MR. PIOTROSKI: No. But if it's – do you know?

Because, you know, whenever I've worked with kids, you always work with the parents, and I – that would be included. Yeah. You know, behavioral analysis or anything like that, that's included.

But if you went for your own counseling to say, you know, I'm having difficulty with that, it would not be.

Q: (Off mic) – do you know if it's something we bring up would be the 616s, when people first come in and when people –

MR. PIOTROSKI: Good point.

Q: – are (in the States ?)?

MR. PIOTROSKI: Yeah. Let me – let me just speak to that.

When you're here in the United States and you're going overseas, and you're saying, well, this doesn't apply to me: That's correct; it doesn't.

However, what we can do – and it's only for medical clearance purposes only – we will authorize what we call a 616, which is medical authorization for assessment, not for treatment, just for assessment, for your child, you – now, I want to make sure I have this: You pay up front; you file with your health insurance; get

the EOB, explanation of benefits, back; it tells you, this is what they're going to pay for; the remainder then is paid by MED. OK?

How I'm doing on time – (inaudible)? All right? Fifteen minutes, 16 minutes?

STAFF: (Off mic.)

MR. PIOTROSKI: All right. I think it's till – 10:30, right? Am I on till 10:30?

STAFF: (Off mic.)

MR. PIOTROSKI: OK, because I want to make sure I cover a couple of other things. I'm focusing on this because this is where the major changes have been. Then we're going to talk about post approvals and medical clearances.

OK. Here's some other issues.

Now, what happens if your child only needs tutoring? Do you have to get the special needs allowance?

STAFF: Yeah.

MR. PIOTROSKI: Pardon me?

Q: Yeah.

MR. PIOTROSKI: Yeah? No.

Q: No?

MR. PIOTROSKI: No.

If your child needs tutoring and there is no learning disability associated with that, your child can – is eligible for the supplemental instruction allowance, which is 276? Help me out here, folks.

STAFF: Two seventy-six, point nine.

MR. PIOTROSKI: Two seventy-six, point nine. OK. Now what is that?

It is an allowance – Leah (sp), let me know if I'm saying this correctly, and I think – I believe so.

If your child is in danger of failing that class or that grade, you can get a statement from – and Pam (sp), if – I think this is correct.

You can get a statement from the teacher and then you just take it to the FMO, Financial Management Officer, and say, I would like the \$4,100 allotment – allowance. You don't have to come to us. And there's no medical clearance change, not at all. All right? And it's an annual renewal.

But you just – you get the statement from the school – right, Elle (sp)? Get the statement from the school and you take it to – and you take it to the Financial Management Officer, and they will authorize the tutoring allowance. No need to come to us. All right? So if your child needs tutoring.

Now, can you get that and the special needs education allowance if your child's at post? What do you think?

Q: I guess so.

MR. PIOTROSKI: Right, right, you can. You can get it.

Can you get it if it's away from post?

Q: No.

MR. PIOTROSKI: No, very good. All right, you're redeemed.

STAFF: (Off mic.)

STAFF: Yeah, he's right.

MR. PIOTROSKI: You're got two right. (Chuckles.)

Q: I've been through that; that's why I know it.

MR. PIOTROSKI: Yeah, you're correct.

Q: (Post ?) still have all the financial stuff, and we don't have anything.

MR. PIOTROSKI: That's right.

OK. A lot of the stuff that I'm touching on, folks, is I'm just touching on it, and you're going to have questions about it afterwards; you can contact us as well. I'm just familiarizing you with some of these.

Did you have a question?

Q: Yeah. The administrative part of this whole thing: Is it with the FMO?

MR. PIOTROSKI: Yes.

Q: So all the, you know, we have tutoring or therapy and whatever, the receipts basically go to –

MR. PIOTROSKI: Well, I am – thank you for that question. I'm going to explain that.

For the tutoring allowance, you know, just that little allowance, \$4,100, that's correct: school document, FMO. That's it, and they know about it. They know about it.

Now, let's say you're going to get a psycho-educational assessment – you don't want a –you know, it's a more significant assessment. And now here's the bottom line: Let's say you're in – you're in Bogotá. I'm just going to use that. You're in Bogotá, and you want your child assessed. Normally we'll set up the assessment in Miami at the Children's Baptist Hospital (sic) there. They do a good job. Or you could come back to Washington; we could do that there.

You are responsible for the up-front payment, folks. It's 4,000 to 5,000 or more. Just get a credit card, put it on there, but as soon as you have that paid bill, you come back to the U.S. – I mean, back to your post, and you present that paid bill to your FMO. They are to pay you immediately, when you have that paid receipt in hand. Then, you file it with your health insurance company. It's not the other way around. I've had many, many calls from FMOs.

So FMOs, if you're out there and you're looking at me, here's the bottom line: Parents pay up front; they come with a paid receipt; they give you the paid receipt; you pay them immediately. They will then file with their health insurance company. If they get any money, they're going to turn it over to you. Don't keep it, folks. Do not keep that money. It's a no-no.

Yes, ma'am.

Q: And this is specific to assessment? Is that – specific to having the assessment done?

MR. PIOTROSKI: That's correct.

Q: OK.

MR. PIOTROSKI: And for follow-up services – speech, PT, OT – it's your bill first. You're the mom and dad. It's your bill first, all right? OK.

What don't we cover? We don't cover computers. Some software, we do. Computers we can't buy because we match what they do in the United States, and the United States will not buy your child a computer. We will not buy your child a computer. But we will do software.

You know, if somebody says, in an IEP – an IEP report, we need this software; we'll buy it. School uniforms, caps and gowns – we don't buy that. Trampolines – we don't buy trampolines. We do not do equestrian therapy, although, you know, it may be recommended, we do not do it. Training and transportation of parents, to and from training – it's on you.

OK. Gifted and talented program. You know, Pam (sp), I'm not going to say too much about this because that's your bailiwick, but that – gifted and talented – we got this from the Office of Overseas Schools – we often have a lot of requests regarding gifted and talented. We have Bea's (sp) name down here, but it could be –

STAFF: Yeah. If they – they should contact the educational officer in their area.

MR. PIOTROSKI: Yeah. Yeah, we just put Bea's (sp) name down.

STAFF: Exactly.

MR. PIOTROSKI: But it's all the REOs, OK? And I'm sure, Pam's (sp) going to touch about gifted and talented.

Can you have a child that's gifted and talented and had a learning disability?

STAFF: Yes.

MR. PIOTROSKI: You got that right.

STAFF: Sorry.

MR. PIOTROSKI: Yeah. (Chuckles.)

You know, I planted her right here. (Laughter.)

But it's true. And frankly, a lot of our children are gifted and talented in one avenue or another. They're very bright kids; they're very sharp children; they have great personalities. And they can have learning disabilities. So it's not unusual. Can you get the gifted and talented with all these others? Sure. It's all part of it.

I want to spend the last 10 minutes on medical clearances, post approvals for special needs children. This is often a hot-button ticket.

I was overseas and – you know, this is a lot of work. I'm not here to tell you that this is not a lot of work. It's a lot of work. It's a lot of work taking children overseas to begin with. It's just a lot of work. It's a lot of work taking ourselves overseas. Then you have children and then, you know, you're working with getting their needs met. And then you have a child with special needs, and that's a whole new dimension. It's a whole new dimension, right? Yeah, what's your – and you want to want to make sure, as we do, that your needs are going to be met.

The Employee Consultation Services are the designated approving authority for children with medical – pardon me – with special needs, not medical – that goes to MED clearances – with special needs education issues.

So when we have a child who has any level of special needs – and that could be from very mild learning speech issues all the way up to severe autism – we have to make the decision if that child can go to the post with you based on the resources that we are aware of at post. That's our job. It's not an easy job.

Our bias is – I can tell you this right now – we want you to go overseas. That's why it's called the foreign service. We don't want you all here in Washington. We want you gone overseas working your specialties and your cones. But that is our job, to assure that your child's needs are met.

ECS recommends clearance for all special needs. If your child is receiving the special needs education allowance, they are a two, all right? They are a two. That means – yes, ma'am?

Q: Can you say what a two means? (Inaudible) – I'm sorry.

MR. PIOTROSKI: Sure. One is worldwide deployability. They can go anywhere, you know? So of course, everyone wants a one for all their children and for themselves because there's no restrictions on where they can go. A two is, there are restrictions, meaning the needs of the child has to be taken in consideration. Are there resources at that post to meet the needs of the child? A five means that the child can't go overseas. The needs are so great, child can't go overseas. A six means that the child can visit. Seven is pending. OK?

Yeah. I don't remember I have a slide here, but I may. I may. And there's greater explanation about that.

Now, here's a situation that we've kind of gone back and forth on, but I think it has changed. And Sarah (sp), I think you and I are in agreement with this. You have a child that has ADHD. No academic accommodations. They're on medication. At one time, they were all a two. Not anymore. They're stable. You know, they're straight-A students. They're doing fine. They can be a one.

Q: And that means they don't qualify for the – (inaudible)?

MR. PIOTROSKI: That's correct. That's correct. Yeah. Yes, ma'am?

Q: What happens now with the new system where everybody can be treated as a one?

MR. PIOTROSKI: I'm not sure I understand the question.

Q: There was a change in the medical clearance systems where, via – (inaudible) – you can choose whether – if you're a class two, you can be treated as a – (inaudible).

MR. PIOTROSKI: Right. Not with children.

Q: Not with children.

MR. PIOTROSKI: Does not apply. Yeah, that was last year. It does not apply to children. Good question, thank you very much. Yes, ma'am?

Q: Just to clarify: The class two medical clearance applies to (SIEA ?) funds, not to that \$4100 tutoring allowance?

MR. PIOTROSKI: That's correct. Good point. Thank you. OK. We'll review assessments. We'll review the needs of the child. We'll go over all that information.

If your child is stable – and Sarah and I talk about this in the – with the mental health staff and the ECS staff – your child's stable on meds, they can be a one. We're in a – and you have no learning accommodations. But as soon as – (inaudible) – there is a learning accommodation, then child has to be a two. It's by law. No getting around it.

All right, here we go. Here are the clearance recommendations.

All right, world, here we go. Worldwide availability. We were just talking about that.

Limited post specific availability, meaning there has to be an accommodation at post.

Not approved for overseas assignment – we have some children.

Children may visit post.

Children in boarding schools. They can come back. They just can't go to school there.

And then number seven, clearance is pending. So you may see with some of your kids sevens. Don't worry about that. It's just means it's – you know, it's pending. We're working with you to come up with a clearance.

Effect smooth sailing – we need updated information. Anything that's over two years is too old. Current – so we need current information.

Challenges in ensuring child's needs are met – that's a given. ECS does not receive current clinical – that can stop us in the process. I'm going to tell you this. As soon as we get it, we don't sit on it; we're going to move on it. Social workers really want to move it forward.

I want to talk about the MCI. This is a medical – I always forget – capability information, right? I always think it should be something different.

But here's what they're doing. A couple of years ago, parents came to us and they said, hey, we'd like this information. At one point, you did not have access to it because it was in what we called the medical capabilities directory and only people in MED could access it because there some private information in there. But now, they are coming up with a bidding tool. It is not a bidding decider. It is a bidding tool.

I think probably not this bidding season coming up, but the next one, it's going to be ready, I'm pretty sure, because right now we're all in the midst of it – you know, coming up with the categories.

This is what's going to happen. Let's say – who are the officers in here? Who are – who are the officers who would be bidding?

Are all family members?

Q: (Inaudible.)

MR. PIOTROSKI: You're the officer. All right.

Q: Yes.

MR. PIOTROSKI: (Chuckles.) Just remind her, all right?

Q: (Inaudible.)

MR. PIOTROSKI: OK. So this is what an officer will do. They will go into this bidding tool. Through MED it will be accessible. And you know what? I think this will be great for us too in collaborating because we'll all have this. And let's say one of your kids has asthma. Another child has a learning disability. And it's

going to be very specific. So it's going to be, you know, a reading problem, or it's going to be dysgraphia, writing problems. It's going to be a math problem, or – it's all going to be in there.

And so you're going to be able to pull up this drop-down menu for yourself, for your child – let's say you have diabetes. Let's say you have a heart problem. You have a history of seizure disorders. It's all going to be in there. That's why it's taking a lot of time right now because we have to go through all the categories and specifically define what they are.

For educational, we just had a meeting yesterday where we're actually putting stuff together. It's pretty time-consuming but it's worth it.

So what we're doing there is that when you go, when the officer's going to bid, they say, you know what? I just got my bid list. I have 20 places on my bid list. But you want to know, what are – what's the best shot? What's the best shot for you to bid, because that's where you want to, you know, put your energy because this is energy- and time-consuming.

The ECS social worker will work with you. They will say, let's go into the MCI tool. You'll go in the MCI too. You'll add all the diagnoses or all the concerns that you have for yourself and your kids. It's going to then provide you with a list of posts that have the services.

Now, does not mean you're going there. What it means is that this is a possibility, because you know what? Pam (sp) and I run into this a lot – Pam (sp) – we have a speech therapist who just got there with her husband. She's going to be there for two years, all right? Guess what? She just got – you know. he just got pulled on assignment; she's going back. There's no more speech therapist there. You know how that goes, right? In the foreign service, it's like mercury; it moves. Resources move.

But it's going to give you a pretty good idea. So you're going to look at that. You're going to look at that where the kids are, where – you know? You're going to look at that list that I showed you early on – (inaudible) – that – you know, here's where the kids are. That's going to help you because this is all about information, information, information.

So you'll be able to go in and you're going to pull that up. Once you pull that up, it's going to say, hey, here's where the services are. You're going to get with your ECS social worker. They're going to work real closely with you. You still have to get some information from the school saying they will accept your child – that's an important piece of this. But you're going to get – you're going to get that information.

So folks, my time is up. But this a lot there. It could be information overload. In summary: generous benefits; lots of information; you have lots of support here from ECS, the Office of Overseas Schools, from a child psychiatrist, mental health, FLO office, Office of Allowances – it's a lot. It's good support. So thanks very much.

(Applause)

(END)